STATEMENT OF ORGANIZATION		OFFICE USE ONLY Report Number: 14052
Name and Address of Committee	2. Date of this Statement	Date Filed: 1/20/2008
L&H PAC (LOUISIANA LIFE & HEALTH PAC) 450 Laurel Street Suite 1400 Baton Rouge, LA 70801	1/20/2008	
	3. Estimated Membership	
	20	
Check If:	4. Amended Statement?	
New Committee	YesX_No	
<ul> <li>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</li> <li>a. Name</li> <li>b. Position</li> <li>c. Address</li> </ul>		
MIKE MULHEARN Chairperson	PO Drawer 1411	
	Monroe, LA 7121	D-1411
MR DAVID L RABENHORST  Treasurer  Rabenhorst Life Insurance Company  P. O. Box 2666  Baton Rouge, LA 70821		
Additional officers listed on attached sheet		
6. Affiliated Organizations  (Any organization other than a political committee which directly or indirectly established administers or financially supports this committee.)		
a. <u>Name</u> b. <u>Address</u> c. Relationship to Committee		
On attached sheet		
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)		
a. <u>Name</u> b. <u>Address</u>		
On attached sheet		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee		
b. Name of Candidate	c	. Office Sought by the Candidate
9. a. Name of Person Preparing Report JULIE FUSELIER		
b. Daytime Telephone		
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.		
This 20th day of January , 2008	<u>.</u> .	
Mike Mulhearn		318/329-0141
Signature of Committee/Chairperson		Daytime Telephone
David L. Rabenhorst	<u> </u>	225/387-0171
Signature of Committee Treasurer if any		Daytime Telephone

Form 200, Rev. 12/03

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name b. Position c. Address

MS VIRGINIA K SHEHEE Officer Kilpatrick Life Insurance Company

P. O. Box 88

Shreveport, LA 71161-0088

DES MOTHE Officer P.O. Box 2128

Gretna, LA 70054

PATRICK FONTENOT Officer P.O. Box 898

Opelousas, LA 70571-0898

MS PHYLLIS PERRON Officer 451 Florida Street North Tower

Suite 1400

Baton Rouge, LA 70801

MR FRANK E PELLERIN Officer Pellerin Life Insurance Company

600 Corporate Blvd. Breaux Bridge, LA 70517

Trade Association

6. Affiliated Organizations

**CONFERENCE** 

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name b. Address c. Relationship to Committee

LOUISIANA INSURERS' 451 Florida Street North Tower

Suite 1400

Baton Rouge, LA 70801

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name b. Address

BANK ONE 451 Florida Street

Baton Rouge, LA 70801